

# KASPER

## Kentucky All Schedule Prescription Electronic Reporting

*Drug Enforcement and Professional Practices  
Office of the Inspector General  
Cabinet for Health and Family Services*



**K**ENTUCKY

**A**LL

**S**CHEDULE

**P**RESCRIPTION

**E**LECTRONIC

**R**EPORTING



# The Cabinet

- In 1999 The Cabinet for Health and Family Services was given the challenge to establish a program to fight the rising incidence of the diversion of legal prescription drugs into the illegal market.
- In response Kentucky implemented:
  - Controlled substance security prescription blanks, and
  - The Kentucky All Schedule Prescription Electronic Reporting (KASPER) system.

# What is KASPER?

One of the largest threats to patient safety in the Commonwealth of Kentucky is the misuse, abuse and diversion of controlled pharmaceutical substances.

KASPER is Kentucky's Prescription Monitoring Program (PMP). KASPER catalogs most of the Schedule II – V controlled substance prescriptions written and dispensed within the state.

KASPER provides a tool for practitioners and pharmacists to improve patient safety and to fight abuse and diversion of legal drugs.

# The Need for KASPER

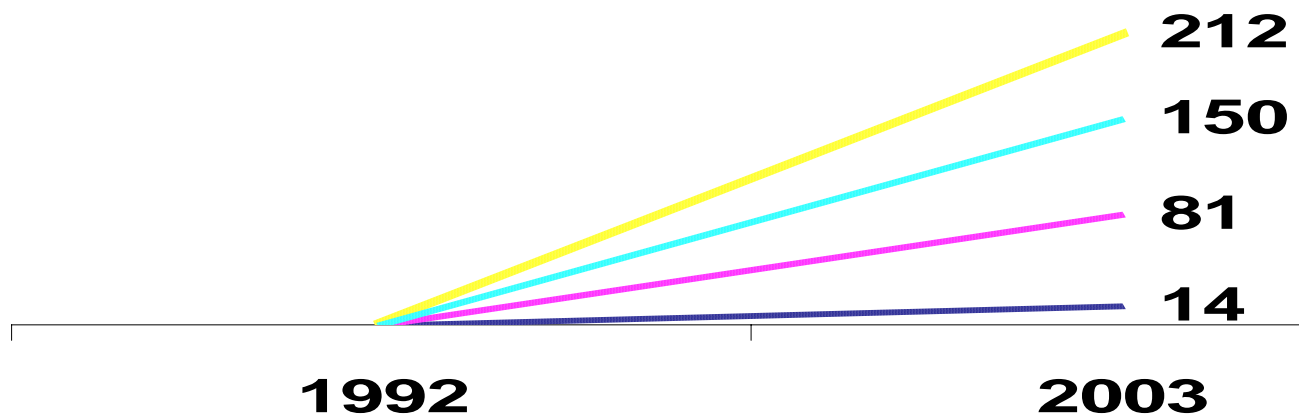
- Health care professionals need a tool to help identify patient prescription drug problems and when intervention may be needed.
- Diversion of controlled substances is reaching epidemic proportions.
  - Diverters cover large areas to obtain drugs.
  - Agencies need efficiency and value in their investigative tools.

# Misuse, Abuse, Diversion

- Misuse:
  - When a schedule II – V substance is taken by an individual for a non-medical reason.
- Abuse:
  - When an individual repeatedly takes a schedule II – V substance for a non-medical reason.
- Diversion:
  - When a schedule II – V substance is acquired and/or taken by an individual for whom the medication was not prescribed.

# The Scope of the Problem

**Percent Increase**



- **US Population**
- **Adults Abusing Controlled Substances**
- **Number of 12 to 17 Year Olds Abusing Controlled Substances**
- **Prescriptions Written For Controlled Substances**



# Perspective

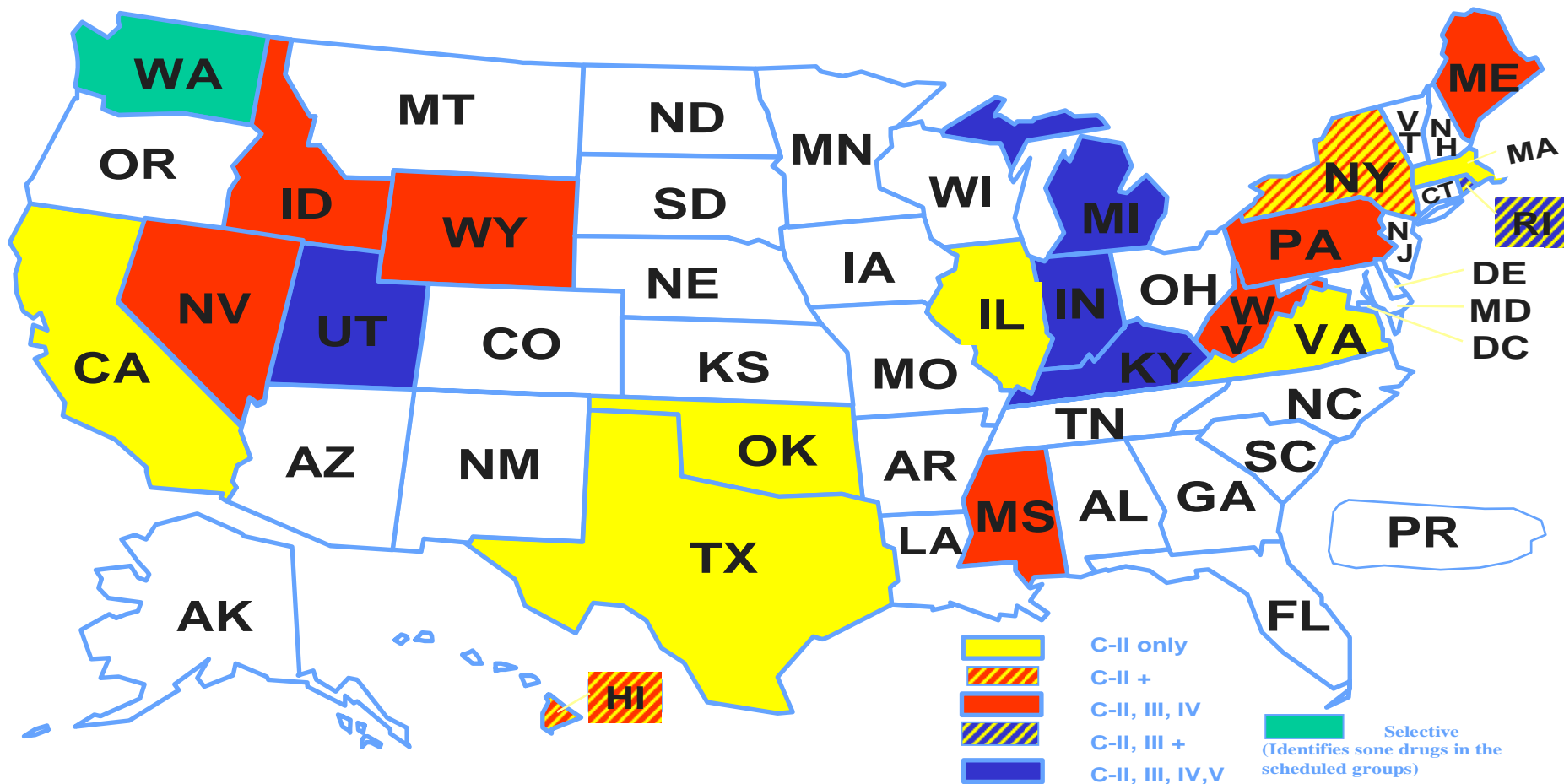
From 1992 to 2003 the 15.1 million Americans abusing controlled prescription drugs exceeded the combined number abusing:

- Cocaine (5.9 million),
- Hallucinogens (4.0 million),
- Inhalants (2.1 million), and
- Heroin (.3 million).

Source: *Under the Counter: The Diversion and Abuse of Controlled Prescription Drugs in the U.S.* Published by The National Center on Addiction and Substance Abuse at Columbia University (CASA), July 2005.



# States With Prescription Monitoring Programs



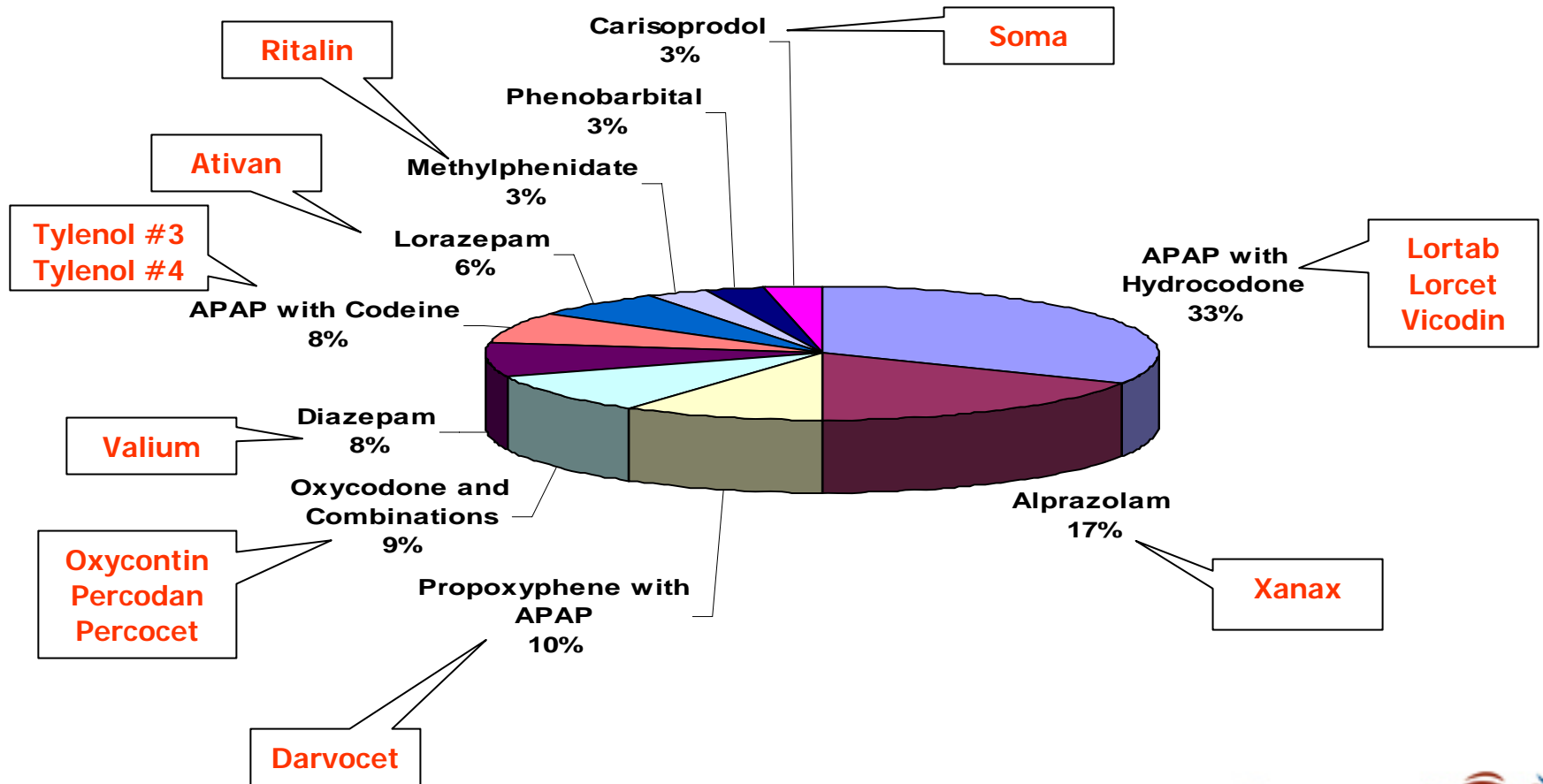
# The Economics of Drug Diversion

## “Legal” Drugs Have Street Values

| Generic Name                 | Brand Name      | Brand Cost/ 100 | Street Value Per 100 |
|------------------------------|-----------------|-----------------|----------------------|
| Acetaminophen w Codeine 30mg | Tylenol #3      | \$56.49         | \$800.00             |
| Diazepam 10 mg               | Valium 10 mg    | \$298.04        | \$1,000.00           |
| Hydromorphone                | Dilaudid 4 mg   | \$88.94         | \$10,000.00          |
| Methylphenidate              | Ritalin         | \$88.24         | \$1,500.00           |
| Oxycodone                    | Oxycontin 80 mg | \$1,081.36      | \$8,000.00           |

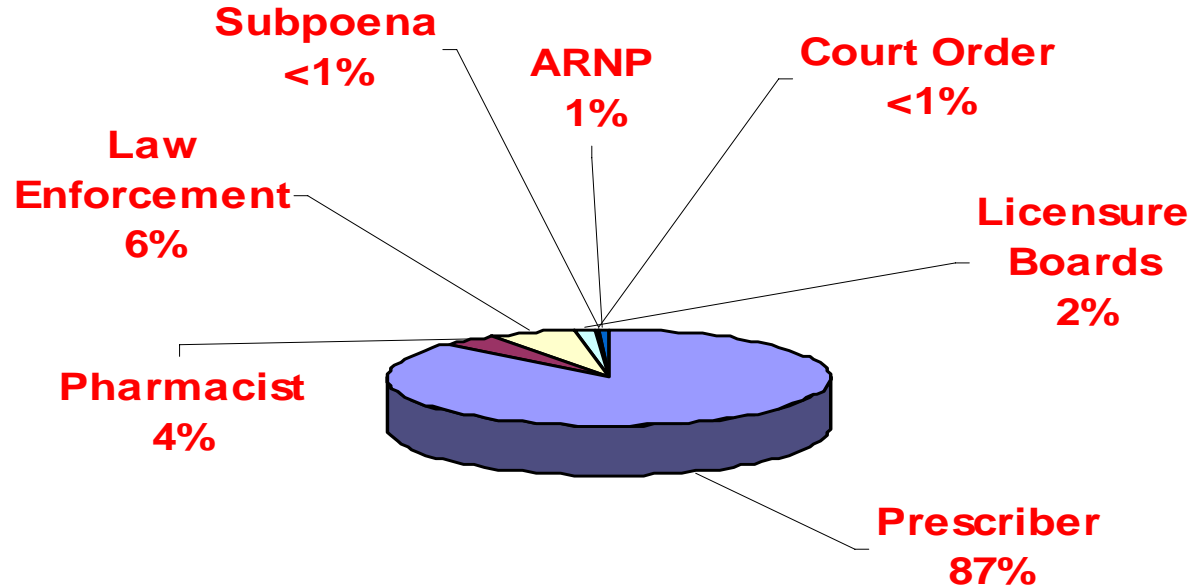
Goldman, MD, Brian, “Unmasking the Illicit Drug Seeker”

# Top Prescribed Controlled Substances By Therapeutic Category By Doses 1/1/1999 Through 07/31/2004



# Who Uses KASPER?

## Percentage of Requests By Type Between 1/1/1999 and 12/31/2004



# Goals of KASPER

**KASPER was designed as a tool to help address the problem of prescription drug abuse and diversion by providing:**

- **A source of information for practitioners and pharmacists**
- **An investigative tool for law enforcement**



# Goals of KASPER

KASPER is **NOT** designed to:

- Prevent people from getting prescription drugs
- To decrease the number of doses dispensed



# KASPER Data

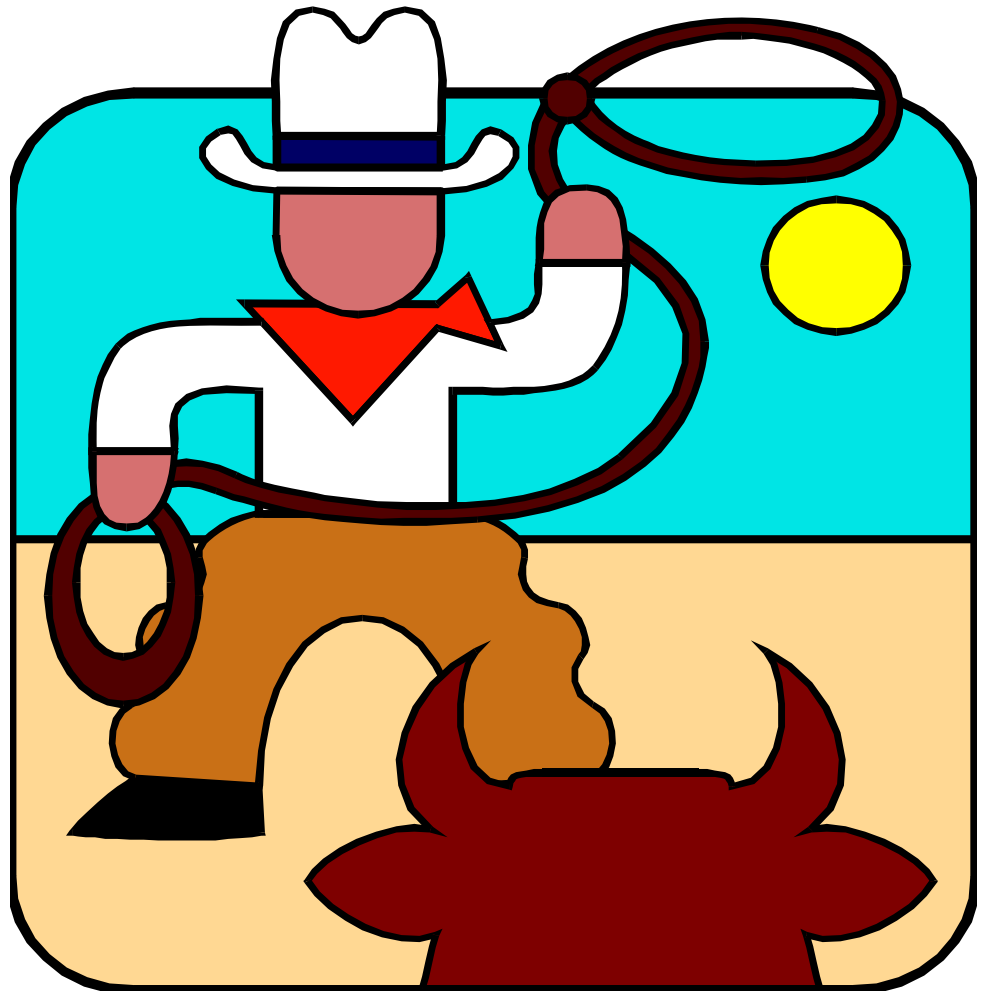
A KASPER report shows all scheduled prescriptions an individual has had for a specified time period, as well as the practitioner who prescribed them and the dispenser who dispensed them.

👉 System includes C-II, III, IV, and V

👉 Updated twice a month

# How Does It Work?

**Prescription data is collected in one location and will be available to individuals with access rights (KRS 218A:202)**





# How Does Data Get Into The Data Base?

- ➡ **Dispensers transmit prescription data to our collection agent by modem, diskette or tape**
- ➡ **Agent verifies, compiles and send to Drug Control to be loaded onto secure server**



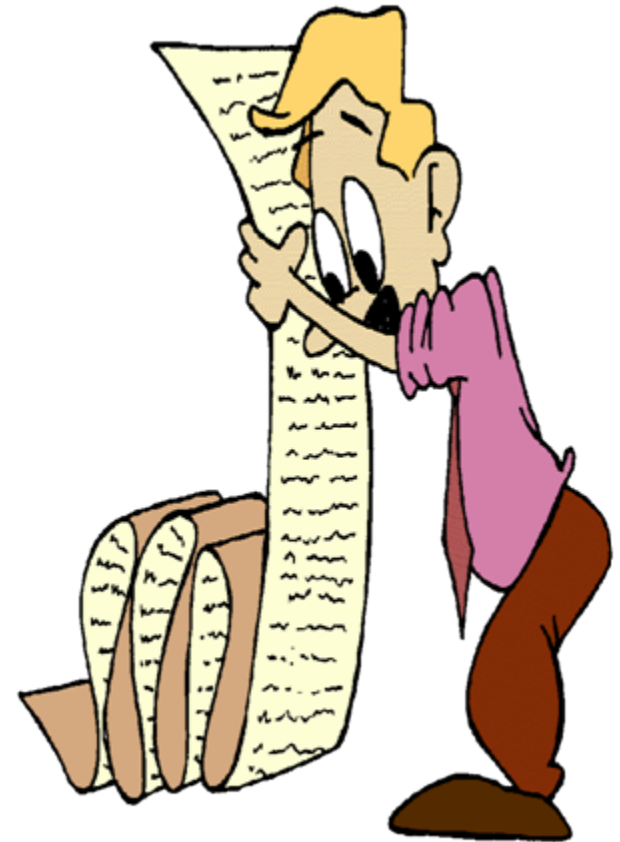
# KASPER Reports

## Who May Get Them?

- Subpoena by a grand jury
- Practitioners & Pharmacists
- Law Enforcement agencies
- Licensing Boards
- Medicaid Program

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Report can ***NOT*** be provided to anyone else except by court order.



# Remember!

- ➡ **Prescription drug abuse is a major problem in Kentucky**
- ➡ **Physicians should not be afraid to prescribe or pharmacists dispense controlled substances for legitimate medical conditions**
- ➡ **Quantity alone is not an enforcement issue - the issue is appropriate medical care**